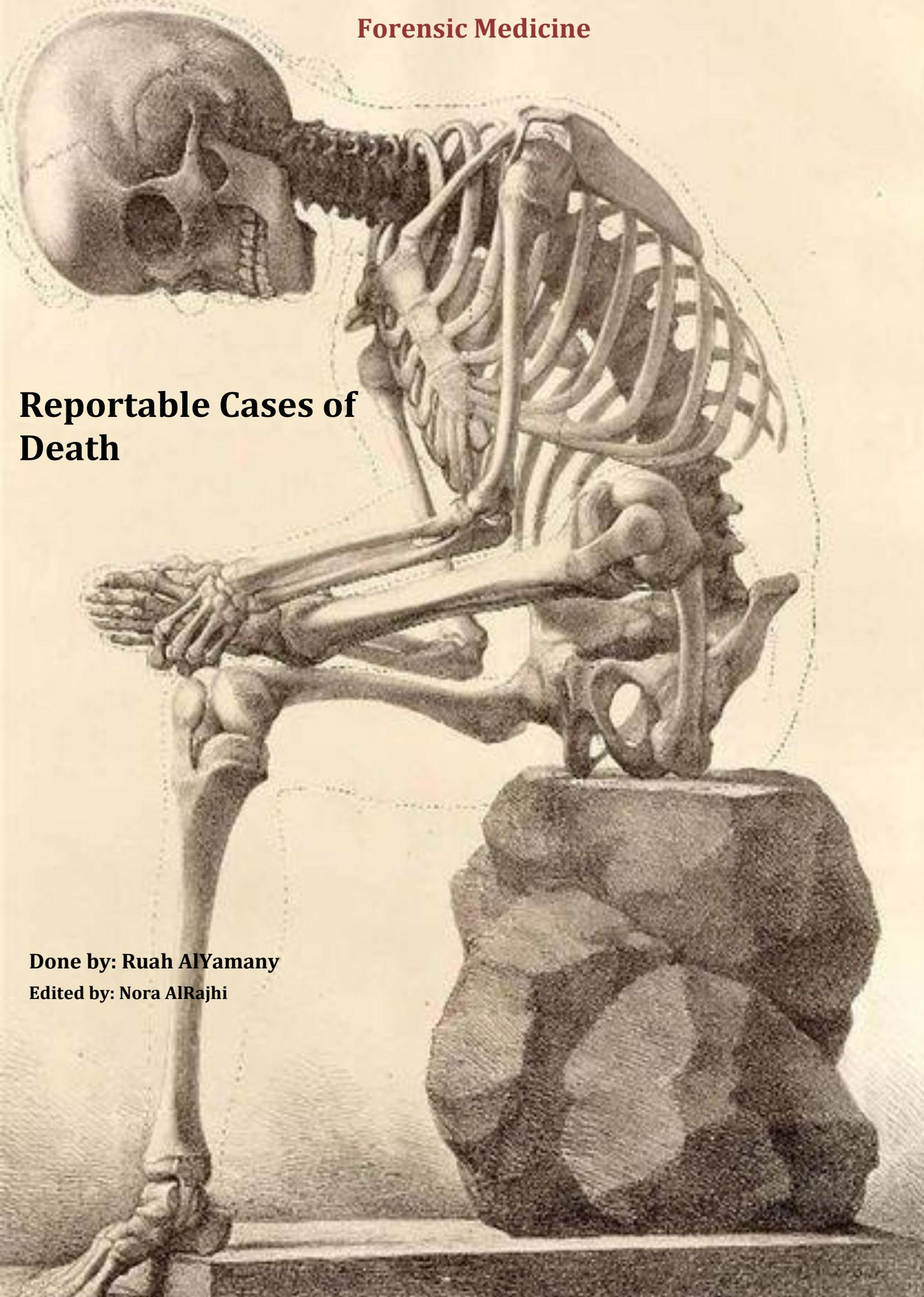


**Reportable Cases of
Death**

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Reporting Cases of Death

When death occurs, not all cases are reported to the Medical Examiner. Once the death is of public interest, its reported to/investigated by the ME. Cases that affect the public interest are mostly those where the identity and/or cause of death are undetermined, or the person was not under the care of a physician. Such cases need to be referred to the ME for identification and analysis. However, not all cases reported and investigated are necessarily autopsied.

Reportable cases can be deaths affecting public interest, but is not limited to it. It can also be:

- **Non-natural**

It is any death known or suspected to be due to other than natural causes. All such deaths must be reported even if natural causes of death are present or contributing the death of person.

Examples:

- Homicides
- Suicides
- Accidents

- **Violent**

Any death resulting from injuries, trauma or wounds from any extrinsic or external factors is considered violence resulting in death.

Suicides and homicides can also be considered violence causing death.

Examples:

- Death due to Suffocation
- Death due to chemicals

- **Unexpected/unexplained**

This includes any death that occurs suddenly from unexplained causes.

Deaths due to obvious natural causes, wherein the precise medical or biological mechanisms are unclear are considered unexpected deaths that should be reported

Examples of unexpected/unexplained deaths:

Individuals who are found dead without obvious cause
Unexpected deaths that occur while treating a patient medically

- **Unattended**

Unattended deaths are those cases of death where a person is found dead without documentation of a physician in attendance within 36 hours preceding death. In attendance may include telephone consultation or prescription within 36 hours preceding death.

- **Unidentified**

Death of a person where the identity of the deceased is unknown.

Note: (Unattended)

If a decedent has been previously diagnosed as suffering from terminal illness and a physician has been in attendance within 30 days preceding death, the death does not need to be reported unless it falls under one of the other listed categories

- **Unclaimed**

These cases include the death of a person in which the body is not claimed by a relative or friend.

- **Infant**

It is defined as; death of the fetus of 20 completed weeks of gestation or more, calculated from the date of the last normal menstrual period, or death of a fetus weighing 350 grams or more. Such deaths include any fetal death due to direct injury of the fetus or indirect through injuring the mother.

Under this category lies any fetal death due to any other reason.

Examples:

- Criminal abortion (even when abortion is self-induced)
- Abortion related to sexual abuse.

- **Child**

Defined as, death of a child under the age of 2 years, where death results from an unknown cause or where the circumstances surrounding the death indicate that Sudden Infant Death Syndrome (SIDS) may be the cause of death. It is mandatory to have an autopsy performed on this type of death.

- **Prisoners or People in health care facilities or correctional institutes**

In such places, it might be believed that death was due to:

- Violence, suicide or accident
- Suspected misadventure, negligence or accident on the part of the attending physician or staff
- Undetermined cause of death
- The death occurred within 10 days of an operative or therapeutic procedure or the patient in under initial induction, under anesthesia or during the recovery from anesthesia, or who dies within 6 months or sustaining a fracture
- Complication of an operative or therapeutic procedures

- **Emergency Room**

It is defined as any death of a person who is presented to an emergency room unconscious and/or unable to communicate coherently, and dies within 24 hours without regaining consciousness or the ability to communicate coherently, unless a physician was in attendance within 36 hours preceding presentation to the hospital.

References

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